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Bib Data Sheet

CONFIRMATION NO. 5075

SERIAL NUMBER 10/828,801	FILING DATE 04/21/2004  RULE	CLASS 280	GROUP ART UNIT 3618	ATTORNEY DOCKET NO. KLLG/211
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* NONE OTS 8/10/05

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE OTS 8/10/05

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 06/26/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	OTS OH	7	10	1

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## TITLE

Combination tool box and dolly

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